



City of Cincinnati

Treasury Division, Room 202, City Hall, Cincinnati, Ohio 45202

(513) 352-6989

APPLICATION FOR ADMISSION TAX LICENSE

Name of Applicant _____ (Phone) _____

Mailing Address _____
(Street or P.O. Box) (City) (State) (Zip Code)

Social Security Number _____ - _____ - _____ or Federal I.D. No. _____ - _____

The applicant is a: () Corporation () Partnership () Individual () Non-Profit Organization

The officers of the organization are:

Title	Name	Address	Zip Code	Phone	Soc. Sec. #

If the person making application is not an officer of the organization, complete the following:

Title	Name	Address	Zip Code	Phone	Soc. Sec. #
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Have you ever been licensed before () Yes () No If yes, provide license number _____

This application is for a: () Temporary Admission Tax License () Permanent Admission Tax License

Date(s) of event(s) from: _____ to: _____ Date ticket sales begin: _____

Location where event will take place: _____

THIS SECTION FOR INITIAL PERMANENT LICENSEES AND ALL TEMPORARY LICENSEES:

A bond is required for initial permanent and temporary licensees. Contact Treasury Division to determine the amount of the bond. The minimum bond is \$100.00.

Admission Prices: \$ _____ \$ _____ \$ _____ \$ _____
Advance Day of Event Other Other

Capacity for each event: _____ Number of scheduled events: _____ Amount of the bond required with this application: \$ _____

NOTE: A tax return must be filed and the tax due remitted on or before the twentieth (20th) day of the month following the month being reported.

The signature of this application hereby agrees to the payment of the taxes collected on admissions received in connection with the operation of this place of admission or event and understands that all books and records including box office statements, ticket stubs, and unsold tickets are subject to audit and must be retained for a period of three (3) years or until released in writing by the City Treasurer (Ref. Chapter 309 CMC).

Under penalties of perjury, I declare that I have examined this application, and to the best of my knowledge and belief it is true, correct and complete.

Signature	Print your name / Title	Date
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Enclose license fee check for \$5.00, plus

Bond amount if required, payable to:

Treasurer, City of Cincinnati

License No.

Issued _____